

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER	LICENSE NUMBER
Willow Creek AFH #3 Jeannie Schmid	603500

NOTE: The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see Chapter 388-76 of Washington Administrative Code.

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	About the Home
1. PROVIDERS STATEMENT (OF	PTIONAL)
The optional provider's state home.	ement is free text description of the mission, values, and/or other distinct attributes of the
2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
06/04/2002	NA NA
4. SAME ADDRESS PREVIOUSL	Y LICENSED AS:
NA	
5. OWNERSHIP	
Sole proprietor	
☐ Limited Liability Corpora	ation
Co-owned by:	
Other: S Corp	
	Personal Care
	eans both physical assistance and/or prompting and supervising the performance of direct ermined by the resident's needs, and does not include assistance with tasks performed by a I. (WAC 388-76-10000)
1 FATING	

If needed, the home may provide assistance with eating as follows:

set up, cutting foods, puree foods and full feeding by caregivers

2. TOILETING

If needed, the home may provide assistance with toileting as follows:

2 hr reminders, stand by assist, or full transfers with mechanical help and full assist

3. WALKING

If needed, the home may provide assistance with walking as follows:

verbal reminders to use walker/cane up to full stand by assist

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

1 person transfers, or full transfers with mechanical help

5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

residents that cannot reposition themselves are assisted by caregivers

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

we believe in letting them do as much as they can and if they need help the caregiver will step in with minimal to full care

7. DRESSING

If needed, the home may provide assistance with dressing as follows:

we believe in letting them do as much as they can and if they need help the caregiver will step in with minimal to full care

8. BATHING

If needed, the home may provide assistance with bathing as follows:

we believe in letting them do as much as they can and if they need help the caregiver will step in with minimal to full care

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

All showers are roll in, no lip to step over, shower chairs in place and specialty equipment available when

Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

We are delegated so we can crush medication, out medications in the mouth and give insulin shots

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

All staff is delegatable so we can administer medications

Skilled Nursing Services and Nurse Delegation

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

medication management	
The home has the ability to provide the following skilled nursing services by delegation:	
insulin injections, medicated lotion, eye and ear drops, wound care, tube feeding, diabetic management,	
o2 therepy, range of motion	
ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION	
with the help of the delegation program and Nursing services that can come into our home our residents	
Specialty Care Designations	
We have completed DSHS approved training for the following specialty care designations:	
Developmental disabilities	
✓ Mental illness✓ Dementia	
ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS	
Although we have the DD designation residents here are elderly so not all DD will fit the homes	
enviroment. DD is taken on a case by case basis	
Staffing	
The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)	
☐ The provider lives in the home.	
A resident manager lives in the home and is responsible for the care and services of each resident at all times.	
☑ The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.	
The normal staffing levels for the home are:	
Registered nurse, days and times: 24 hour on call 7 days a week	
Licensed practical nurse, days and times:	
□ Certified nursing assistant or long term care workers, days and times: 7 days 24 hrs a day	
Awake staff at night	
Other:	
ADDITIONAL COMMENTS REGARDING STAFFING	
M-F there are two people on duty. The managers are there from 8-4 to assist with doctors, pharmacy,	
and patient care Cultural or Language Access	
The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide	
informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)	
The home is particularly focused on residents with the following background and/or languages:	
english	
ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS	
while we are willing to adjust to different cultures I think it is important that you find a home that is	
comfortable for your loved one and speaks the same language	
Medicaid Medicaid	

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the

circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)
☐ The home is a private pay facility and does not accept Medicaid payments.
☐ The home will accept Medicaid payments under the following conditions:
We will accept medicaid only after 2 years of private pay. If state rate is less than 87.00 per day I cannot accept that rate, our cost of care is higher than that. If a resisdent is in a private room and wants to retain that room they may pay the difference. Ask to see my full disclosure form as it will not fit in this space
ADDITIONAL COMMENTS REGARDING MEDICAID
Activities
The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).
The home provides the following:
Arts and crafts, card games, puzzles, word search. Books on wheels, holiday and birthday parties
ADDITIONAL COMMENTS REGARDING ACTIVITIES
Activities are very indivualized and we accomadate what the resident wants to do